

Lamont Hunter  
PCT International Division  
(703) 305-3386

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO 101070840	FILING DATE			
						APPLICANT(S)				
CLAIMS										
1	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		* 51	* IND. 1 DEP. 1	* IND. 1 DEP. 1	* IND. 1 DEP. 1
	IND.	DEP.	IND.	DEP.	IND.	DEP.				
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OTAL ID.							TOTAL IND.			
OTAL DEP.							TOTAL DEP.			
OTAL CLAIMS							TOTAL CLAIMS			